



#### Behavioral Health is Essential To Health



#### **Prevention Works**







People Recover







# Introducing the New PATH Annual Report

August 1, 2016





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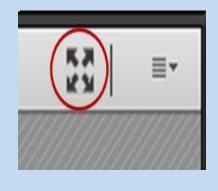
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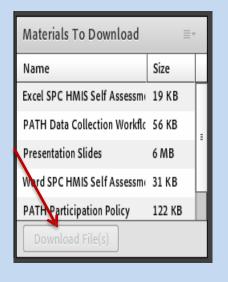
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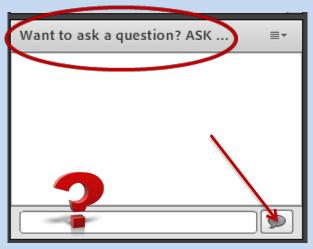


## Housekeeping

#### Q&A and Technical Issues

If you have questions for the presenters, enter them in the presenter Q&A box and our presenters will respond to as many questions as possible at the end of the presentation.

Technical issues and questions can also be submitted through the Q&A box.



#### Chat with us!

If you have general comments, please post them in the participant chat box.





#### Introduction

#### Caroline Fernandez, M.S.W.

Director, PATH Program

Homeless Programs Branch

Center for Mental Health Services

Substance Abuse and Mental Health Services Administration



#### **Learning Objectives**

Upon completion of the webinar, participants will be able to

- identify changes to the PATH Annual Report,
- understand the data elements and new definitions in the PATH Annual Report,
- describe the relationship between PATH Annual Report elements and data elements in HMIS, and
- identify the steps for proper PATH data collection in HMIS.



### **PATH Reporting Timeline**

#### **FY 2016**

(July 1, 2015 – June 30, 2016 for most states)

Data collected for 2016 PATH Annual Report



**End of State FY 2016** 

Deadline for PATH HMIS transition



**August 2016** 

New PATH Annual Report adopted



**FY 2017** 

First year with all PATH data collected in HMIS



**Fall 2016** 

FY 2016 PATH Annual Report completed in PDX



#### **Transition Guidance**

#### FY 2016 report

- —Data elements that were on the previous report form and are on the new report form are required to be reported
- –New data elements are optional

#### FY 2017 report

- -All data elements on the new report are required to be reported
- -All data can be collected in HMIS
  - Exception: Number of trainings provided by PATH-funded staff (not collected in HMIS)



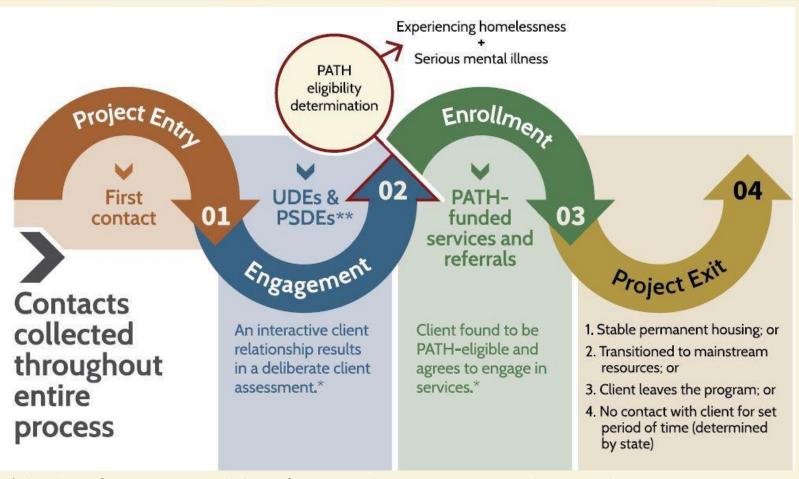
## **PATH Annual Report**

## What is the difference between HMIS and the PATH Data Exchange (PDX)?

- HMIS collects client-level data
- PDX reports provider-level data



#### **PATH HMIS Data Collection Workflow**



<sup>\*</sup>The date of engagement and date of PATH enrollment may occur on the same date.

PSDEs = program-specific data elements

<sup>\*\*</sup>UDEs = universal data elements

#### What's New in the PATH Annual Report

- Based on HMIS data elements that are required for PATH
- Format
- Staff training
- Revisions to data element labels and structure
  - Persons contacted
  - —Services provided
  - —Referrals provided
- Outcomes
- Connection with SOAR
- Demographic data for persons contacted removed
- Revised definitions



### **Budget Information**

#### Budget information is not collected in HMIS

- Federal funds
- 2. Matching funds
- 3. Total funds dedicated to PATH-eligible population
- 4. Number of staff supported by PATH funds
- 5. Number of FTE staff supported by PATH funds
- 6. Number of trainings provided by PATH staff
- 7. Type of organization



• Staff training: Professional development programs and materials that emphasize best practices and effective service delivery for workers who address the needs of people experiencing homelessness.





## **Poll Question**

Vote on below! click the circle next to the answer you want to select. There is no submit



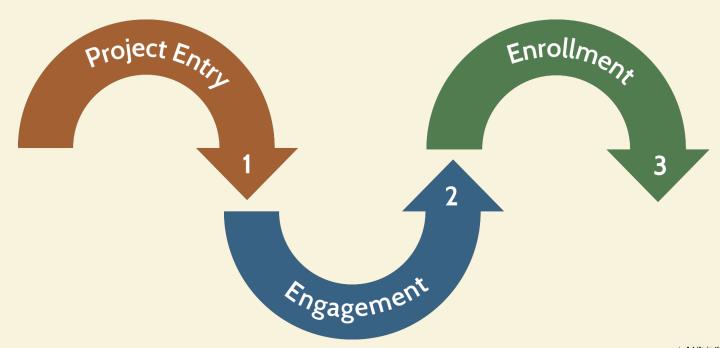
#### **Poll Question**

Does your PATH program (for SPCs: any PATH program in your state/territory) provide PATH-funded training to local communities?

- a. Yes
- b. No
- c. I'm not sure.



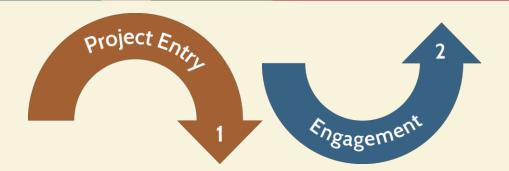
8. Number of persons contacted by PATH-funded staff this reporting period



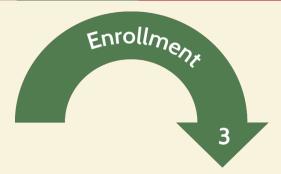




- 9. Number of persons contacted this reporting period in a PATH Street Outreach project
- 10. Number of persons contacted this reporting period in a PATH Services Only project
- 11. Total number of persons contacted this reporting period (#9 + #10)



- 12.Instances of contact, from first contact until the date of enrollment, for all active clients who became enrolled this reporting period
- 13. Number of persons contacted this reporting period who could not be enrolled because of ineligibility for PATH



- 14. Number of persons contacted this reporting period who became enrolled in PATH
- 15. Number of active, enrolled PATH status at any point during reporting period
- 16. Number of active, enrolled PATH clients receiving community mental health services through any funding source at any point during the reporting period

- Outreach: The process of identifying and engaging with individuals who are potentially PATH eligible.
- Contact: An interaction between a PATH-funded worker or workers and an individual who is potentially PATH eligible or enrolled in PATH.



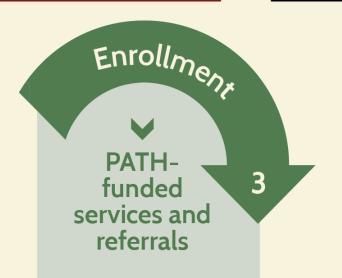


- PATH eligible: Per the authorizing legislation, PATH eligible means that an individual has a serious mental illness, or serious mental illness and substance use disorder, and is experiencing homelessness or is at imminent risk of becoming homeless.
- PATH enrolled: A PATH-eligible individual and a PATH provider have mutually and formally agreed to engage in services and the provider has initiated an individual file or record for that individual.



#### **Services Provided**

- 17a. Reengagement
- 17b. Screening
- 17c. Clinical assessment
- 17d. Habilitation/rehabilitation
- 17e. Community mental health
- 17f. Substance use treatment
- 17g. Case management
- 17h. Residential supportive services
- 17i. Housing minor renovation
- 17j. Housing moving assistance
- 17k. Housing eligibility determination
- 17l. Security deposits
- 17m. One-time rent for eviction prevention



Client found to be PATH-eligible and agrees to engage in services.

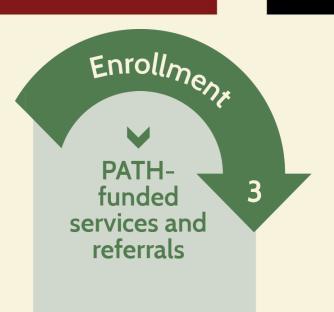


- Reengagement: The process of engaging with PATH-enrolled individuals who are disconnected from PATH services.
- **Screening:** An in-person process during which a preliminary evaluation is made to determine a person's needs and how they can be addressed through the PATH program.
- Clinical assessment: A clinical determination of psychosocial needs and concerns.



#### **Referrals Provided**

- 18a1. Community mental health
- 18a2. Substance use treatment
- 18a3. Primary health/dental care
- 18a4. Temporary housing
- 18a5. Permanent housing
- 18a6. Income assistance
- 18a7. Employment assistance
- 18a8. Medical insurance



Client found to be PATH-eligible and agrees to engage in services.



- **Referral:** Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service.
- Attained referral: A PATH-enrolled client begins receiving services as the result of PATH assistance.



Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that...

- Community mental health referral: ...stabilizes, supports, or treats people for mental health disorders or co-occurring mental health and substance use disorders.
- Substance use treatment referral: ...offers preventive, diagnostic, and other services and supports for individuals who have psychological and/or physical problems with use of one or more substances.



#### Collection of data for the following three referrals is optional.

Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that...

- Job training referral: ...helps prepare an individual to gain and maintain the skills necessary for paid or volunteer work.
- Educational services referral: ...offers academic instruction and training.
- Housing services referral: ...offers assistance with attaining and sustaining living accommodations.



## **Poll Question**

Vote on below! click the circle next to the answer you want to select. There is no submit



#### **Poll Question**

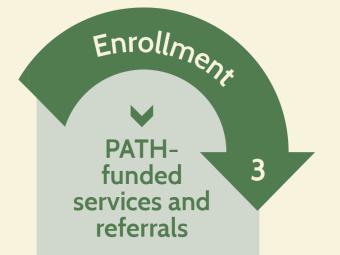
A PATH staff member is working with an enrolled PATH client who is receiving community mental health services. However, the individual is not receiving those services through the PATH program and did not receive a referral from PATH for the service. Where in the new PATH Annual Report would this individual receiving community mental health services be reported?

- a. #16 (Number of active, enrolled PATH clients receiving community mental health services through any funding source at any point during the reporting period)
- b. #17e (Services provided: Community mental health services)
- c. #18a1 and #18b1 (Referrals provided: Received and attained community mental health services)
- d. This would not be reported in the new report.



#### **Outcomes**

- 19. Income from any source
- 20. SSI/SSDI
- 21. Non-cash benefits from any source
- 22. Section 8, public housing, or other ongoing rental assistance
- 23. Covered by health insurance
- 24. Medicaid/Medicare
- 25. All other health insurance
- 26. Mental health services
- 27. Substance use services



Client found to be PATH-eligible and agrees to engage in services.



#### **Outcomes**

#### Outcome measurement

- Number of clients receiving each service/benefit at PATH project entry
- Number of clients receiving each service/benefit at PATH project exit (for those exited from PATH this reporting period)
- Number of clients receiving each service/benefit at report end date (for those still active in PATH as of report end date)



## **Poll Question**

Vote on below! click the circle next to the answer you want to select. There is no submit



#### **Poll Question**

For which outcomes measures are your PATH programs currently collecting data? Select all that apply.

- a. Income from any source
- b. SSI/SSDI
- c. Non-cash benefits from any source
- d. Section 8, public housing, or other ongoing rental assistance
- e. Covered by health insurance
- f. Medicaid/Medicare
- g. All other health insurance
- h. Mental health services
- Substance use services
- j. We are not currently collecting outcome measures for PATH.
- k. For SPCs: Some PATH providers are collecting outcome measures and others are not.

#### **Demographics**

28a. Gender

28b. Age

28c. Race

28d. Ethnicity

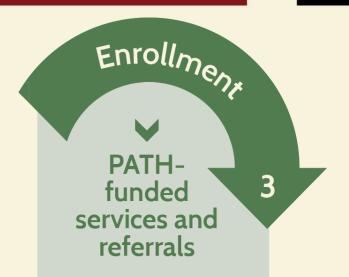
28e. Veteran status

28f. Co-occurring disorder

28g. SOAR connection

28h. Living situation

28i. Chronically homeless



Client found to be PATH-eligible and agrees to engage in services.



### **Demographics**

- Changes to demographic elements:
  - -Client doesn't know
  - -Client refused
  - -Data not collected
  - -Race
    - "Two or more races" category removed
    - All races with which an individual identifies are reported
    - Total for race category may not match total persons enrolled
  - –New element: SOAR connection
  - –New element: Chronically homeless



## **PATH Data Collection and Reporting Process**

PATH provider enters client data into the local HMIS.

PATH provider extracts PATH Annual Report data from HMIS (12 months of data).

PATH provider inputs provider-level data into the PATH Data Exchange (PDX) during the PATH annual reporting period.

PDX runs validation tests to ensure data aligns with report logic. "Warnings" identify atypical data. Data from "warnings" in PDX are reviewed by SAMHSA and contract staff.

When the reports are finalized, SPC approves the reports in PDX.

SPC reviews PATH provider reports.

When all data fields are complete and validation errors and warnings are cleared, PATH provider submits the report in PDX.

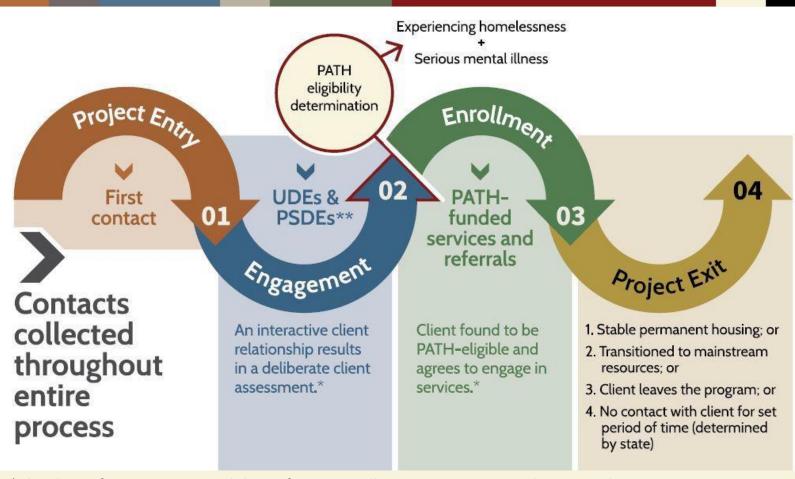
Data are finalized and data tables reflecting state-level and national PATH data are developed.

SAMHSA reports to Congress on national PATH data measures.

PATH receives funding from Congress to continue providing PATH services.



## **PATH HMIS Data Collection Workflow**



<sup>\*</sup>The date of engagement and date of PATH enrollment may occur on the same date.



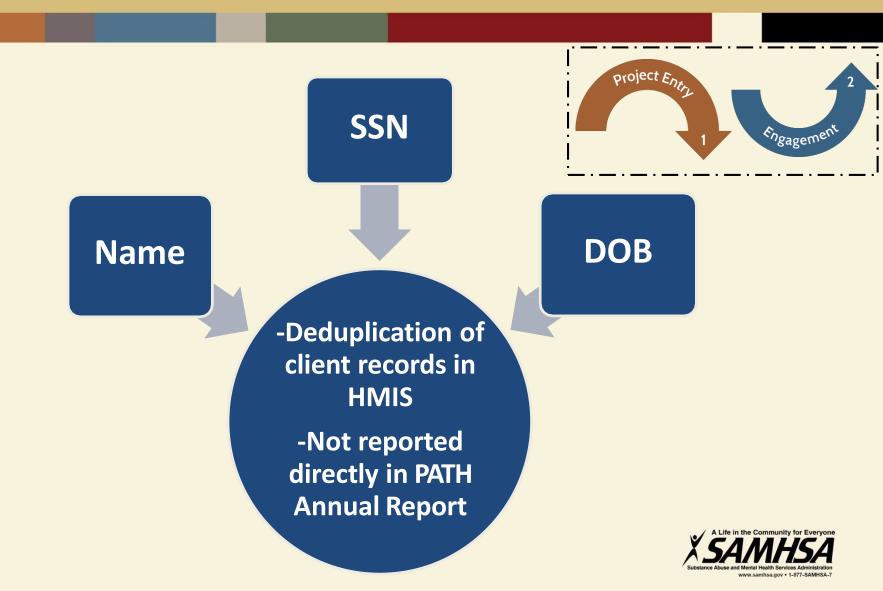
<sup>\*\*</sup>UDEs = universal data elements

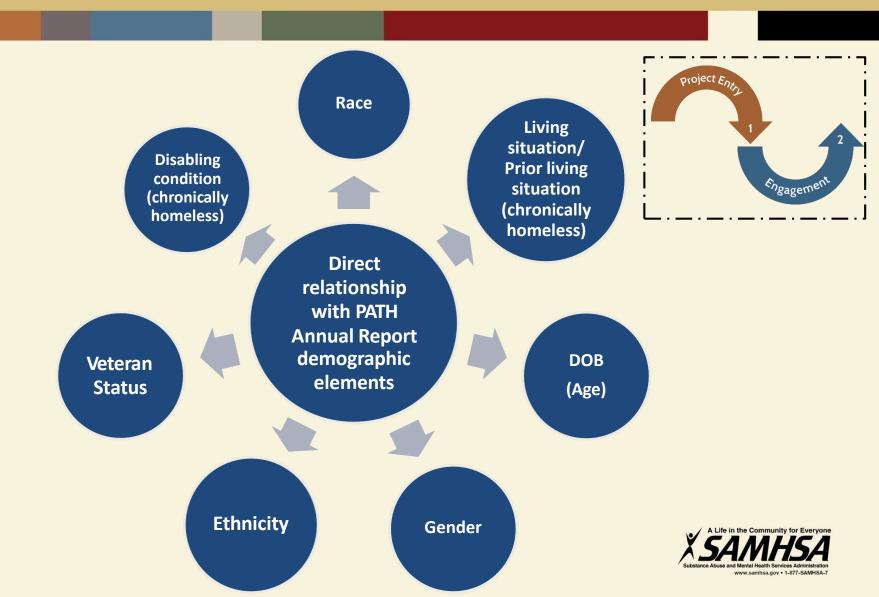
PSDEs = program-specific data elements

- Name
- Social Security number
- Date of birth
- Race
- Ethnicity
- Gender
- Veteran status
- Disabling condition

- Living situation/prior living situation
- Project entry date
- Project exit date
- Destination
- Relationship to head of household
- Client location







project Entr Project Project Exit entry date Used to determine individuals with active PATH records during the reporting period Project exit date

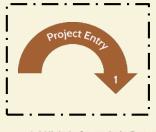
Destination Aroject Exit

Allow for complete client records and use of data at CoC level



Client location

Relationship to head of household

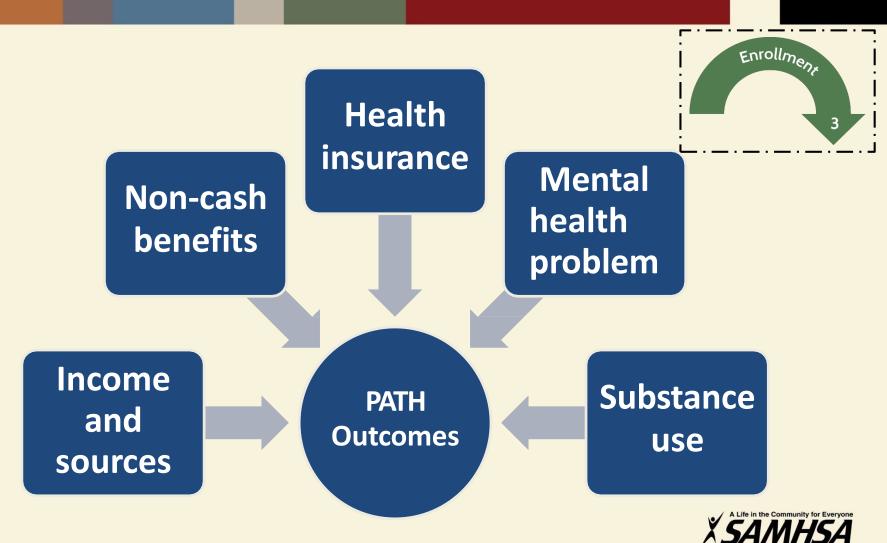




- Housing status
- Income and sources
- Non-cash benefits
- Health insurance
- Physical disability
- Developmental disability
- Chronic health condition
- Mental health problem

- Substance abuse
- Contact
- Date of engagement
- Services provided PATH funded
- Referrals provided PATH
- PATH status
- Connection with SOAR





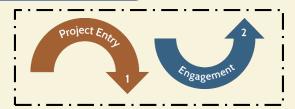
Elements used for CoC data and to determine client eligibility for CoC programs

Housing status

Physical disability

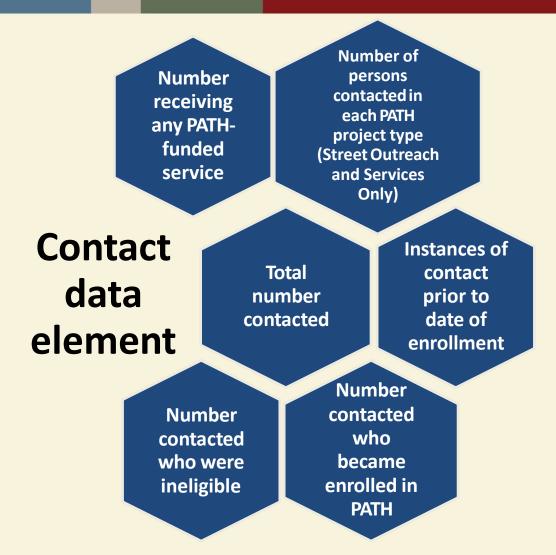
Developmental disability

Chronic health condition

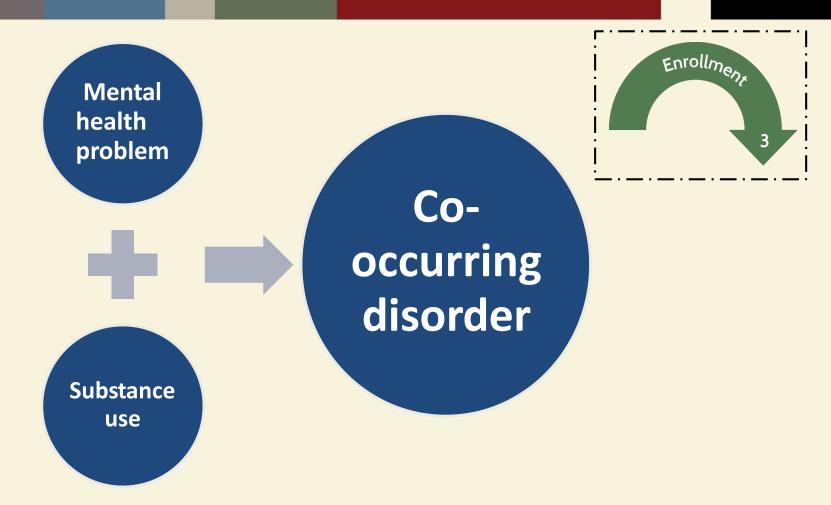














PATH Status

Number with active, enrolled PATH status at any point during reporting period

Mental health problem

Number of active, enrolled PATH clients receiving community mental health services through any funding source at any point during the reporting period



Connection with SOAR

**SOAR** connection (demographics section)

Services Provided

Services provided elements (PATH-enrolled individuals only)

Referrals Provided

Referrals provided elements (PATH-enrolled individuals only)



# **Next Steps**

- If you are not yet using HMIS for PATH data collection:
  - —Providers: Notify your State PATH Contact
    - Provide information about the transition barriers you are facing
    - Provide a timeline and action steps for completing the transition
  - –State PATH Contacts: Notify your SAMHSAGovernment Project Officer
    - Provide information about providers who are not using HMIS and the barriers they are facing
    - Provide a timeline and action steps for all PATH providers to complete the HMIS transition





# **Next Steps**

### If you are using HMIS for PATH data collection:

- —Ensure PATH project setup in HMIS is accurate.
- -Ensure that data collection workflow is accurate.
- -When the new report is programmed in your local HMIS (completed by HMIS vendors), run test reports to ensure the data is accurate.

### Request technical assistance if needed

- —PATH providers should contact their State PATH Contact.
- -State PATH Contacts should contact their SAMHSA GPO and PATH HMIS learning community manager.



# Questions





### **Presenters**

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## Behavioral Health is Essential To Health



## Prevention Works





Treatment is Effective



People Recover